

SUBMIT ENTRY BLANK NO LATER THAN MARCH 27, 1961

THE CLEVELAND MUSEUM OF ART
FORTY-THIRD ANNUAL EXHIBITION OF WORK BY ARTISTS AND CRAFTSMEN OF THE WESTERN RESERVE
MAY 10 to JUNE 11, 1961

PLEASE
PRINT
PLAINLY

Collaborator if any _____

Artist

Sarah Clague

Address

2302 Murray Hill Road
Cleveland 6

Shipping Address _____

Tel.

9A16734

Please enclose Registration Fee of \$2.00 (Check or Money Order) with Entry Blank.

NUMBER FOR SALE	NUMBER IN EDITION (Graphic Prts.)	PRICE	TITLE	MEDIUM	CLASS	DO NOT WRITE IN THESE COLUMNS	
1		35.00	Three legged Bowl	Pottery	7	4163	R
1		30.00	Mushroom Vase	Pottery	7	4164	R
1		NTS	Mushroom Box (top) (cover)	Pottery	7	4162	R

Use second blank if required

Permission to print prices on labels granted unless declined here.

IMPORTANT

This entry blank must be fully made out, (typewritten or plainly printed) and signed.
Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the
Museum will have the right to dispose for its own account any entry not called for by
July 25, 1961.

The submission of entries will be construed as acceptance of all conditions printed
in this entry blank.

Sarah Clague
SIGNATURE